						•	
Fill in this	s information to identify your case:				irected in	this form and in	Form
Debtor 1	Abdulmanaf Jasim		122A-1Sup	p:			
Debtor 2 (Spouse, if f	iling)		■ 1. Th	ere is no pres	umption o	f abuse	
United St	tates Bankruptcy Court for the: _Eastern District	of Pennsylvania	ар		nade unde	ne if a presumpti er <i>Chapter 7 Mea</i>	
Case nur	e number 21-10141			☐ 3. The Means Test does not apply now because of			
(			qualified military service but it could apply later.				
			☐ Che	ck if this is a	n amend	ed filing	
Officia	al Form 122A - 1						
Chap	ter 7 Statement of Your Cu	rrent Monthly	Income	<b>!</b>			04/20
attach a se case numb	plete and accurate as possible. If two married people eparate sheet to this form. Include the line number to ber (if known). If you believe that you are exempted fi military service, complete and file <i>Statement of Exer</i> Calculate Your Current Monthly Income	which the additional inform om a presumption of abuse	nation applies. ( because you d	On the top of an o not have prin	ny addition	nal pages, write yo sumer debts or be	our name and ecause of
1. <b>Wh</b> a	at is your marital and filing status? Check one	only.					
	Not married. Fill out Column A, lines 2-11.						
	Married and your spouse is filing with you. Fi∥	out both Columns A and B	3, lines 2-11.				
<b>I</b>	Married and your spouse is NOT filing with you	ı. You and your spouse a	are:				
	Living in the same household and are not le	gally separated. Fill out be	oth Columns A	and B, lines 2	2-11.		
	Living separately or are legally separated. Fi penalty of perjury that you and your spouse are living apart for reasons that do not include evac	e legally separated under r	nonbankruptcy	law that applie	es or that		
101(10) the 6 m	he average monthly income that you received from a A). For example, if you are filing on September 15, the 6 onths, add the income for all 6 months and divide the to s own the same rental property, put the income from tha	month period would be March al by 6. Fill in the result. Do no	n 1 through Augu ot include any inc	st 31. If the amo	ount of your ore than or	monthly income vance. For example, it	aried during f both
			Column Debtor		Column B Debtor 2 or non-filing spouse		
	or gross wages, salary, tips, bonuses, overtime roll deductions).	e, and commissions (befo	ore all \$	0.00	\$	0.00	
	nony and maintenance payments. Do not includumn B is filled in.	le payments from a spous	e if \$	0.00	\$	0.00	
<b>of y</b> from and	amounts from any source which are regularly ou or your dependents, including child suppon an unmarried partner, members of your househor roommates. Include regular contributions from a d in. Do not include payments you listed on line 3.	rt. Include regular contributed, your dependents, pare spouse only if Column B is	utions ents,	0.00	\$	0.00	
i	income from operating a business, profession						
		Debtor 1					
	ss receipts (before all deductions)	\$ 0.00					
	inary and necessary operating expenses	-\$ 0.00 Conv.h	000 b f	0.00	¢	0.00	
	monthly income from a business, profession, or fa	arm \$0.00 Copy h	iere -> \$	0.00	\$	0.00	
6. <b>Net</b>	income from rental and other real property	Debtor 1					
Gro	ss receipts (before all deductions)	\$ 0.00					
J. 0.	co . coc.pto (pororo an acadonorio)	·					

Official Form 122A-1

0.00

0.00 Copy here -> \$

\$

-\$

Ordinary and necessary operating expenses

7. Interest, dividends, and royalties

Net monthly income from rental or other real property

0.00

0.00

0.00

0.00

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**Abdulmanaf Jasim** 21-10141 Debtor 1 Case number (if known) Column B Column A Debtor 2 or Debtor 1 non-filing spouse 8. Unemployment compensation 845.00 845.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For your spouse \$ 0.00 9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled 0.00 0.00 if retired under any provision of title 10 other than chapter 61 of that title. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments made under the Federal law relating to the national emergency declared by the President under the National Emergencies Act (50 U.S.C. 1601 et seq.) with respect to the coronavirus disease 2019 (COVID-19); payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below.. 0.00 0.00 \$ 0.00 0.00 Total amounts from separate pages, if any. \$ 0.00 0.00 11. Calculate your total current monthly income. Add lines 2 through 10 for 845.00 845.00 1,690.00 \$ \$ each column. Then add the total for Column A to the total for Column B. Total current monthly Part 2: **Determine Whether the Means Test Applies to You** 12. Calculate your current monthly income for the year. Follow these steps: Copy line 11 here=> 12a. Copy your total current monthly income from line 11 1.690.00 Multiply by 12 (the number of months in a year) **x** 12 20.280.00 12b. The result is your annual income for this part of the form 12b. 13. Calculate the median family income that applies to you. Follow these steps: PA Fill in the state in which you live. 4 Fill in the number of people in your household. Fill in the median family income for your state and size of household. 103.857.00 13. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 14. How do the lines compare? Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. Go to Part 3. Do NOT fill out or file Official Form 122A-2. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. 14b. Go to Part 3 and fill out Form 122A-2. Part 3: Sign Below By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct. X /s/ Abdulmanaf Jasim

Abdulmanaf Jasim
Official Form 122A-1

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Debtor 1	Abdulmanaf Jasim	Case number (if known)	21-10141	
	Signature of Debtor 1			
Da	February 16, 2021  MM / DD / YYYY			
	If you checked line 14a, do NOT fill out or file Form 122A-2.			
	If you checked line 14b, fill out Form 122A-2 and file it with this for	m.		

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Debtor 1 Abdulmanaf Jasim Case number (if known) 21-10141

## **Current Monthly Income Details for the Debtor**

**Debtor Income Details:** 

Income for the Period 07/01/2020 to 12/31/2020.

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Debtor 1 Abdulmanaf Jasim Case number (if known) 21-10141

## **Current Monthly Income Details for the Debtor's Spouse**

**Spouse Income Details:** 

Income for the Period **07/01/2020** to **12/31/2020**.

Line 8 - Unemployment compensation (included in CMI)

Source of Income: **PA Dept of Labor** Constant income of **\$845.00** per month.